

STATE OF HAWAII — DEPARTMENT OF TAXATION
— **AMENDED** —
PERIODIC TRANSIENT ACCOMMODATIONS TAX RETURN

DO NOT WRITE IN THIS AREA

22


NAME: _____

☐ **MONTH OF** _____ **19** _____
(Do not combine your income for more than one month, if filing monthly.)

☐ **QUARTER OF** _____ **19** _____ **T.A. REG. NO.** _____
(Do not combine your income for more than one quarter, if filing quarterly.)

☐ **SEMIANNUAL PERIOD OF** _____ **19** _____
(Do not combine your income for more than one semiannual period, if filing semiannually.)

THIS FORM SHOULD NOT BE USED AFTER THE ANNUAL RETURN AND RECONCILIATION HAS BEEN FILED.

DISTRICT	GROSS RENTAL PROCEEDS OR a GROSS RENTAL	EXEMPTIONS/DEDUCTIONS b (EXPLAIN ON REVERSE SIDE)	c TAXABLE PROCEEDS	RATE	d TAXES
TAXATION DISTRICT 1 (OAHU)				.06	1
TAXATION DISTRICT 2 (MAUI, MOLOKAI, LANAI)				.06	2
TAXATION DISTRICT 3 (HAWAII)				.06	3
TAXATION DISTRICT 4 (KAUAI)				.06	4
5. TOTAL TAX DUE (ADD LINES 1 thru 4 of column d AND ENTER HERE)					5
6. PENALTIES (ON LINE 5)					6
7. INTEREST (ON LINE 5)					7
8. TOTAL AMOUNT DUE (ADD LINES 5, 6, and 7; ENTER AMOUNT HERE)					8
9. TOTAL TAX PAID FOR THE PERIOD					9
10. ADDITIONAL ASSESSMENTS PAID FOR THE PERIOD, IF INCLUDED ABOVE					10
11. PENALTIES \$ _____ INTEREST \$ _____ PAID DURING THE PERIOD					11
12. TOTAL PAYMENTS MADE (LINES 9 TO 11 INCLUSIVE)					12
13. IF LINE 12 IS LARGER THAN LINE 8, ENTER CREDIT TO BE REFUNDED (LINE 12 MINUS LINE 8)					13
14. IF LINE 8 IS LARGER THAN LINE 12, ENTER TAXES DUE (LINE 8 MINUS LINE 12)					14
15. FOR LATE FILING ONLY: 					
15a Penalty _____					15a
15b Interest _____					15b
16. TOTAL TAXES NOW DUE AND PAYABLE (ADD LINES 14 AND 15)					16
17. PLEASE ENTER AMOUNT OF YOUR PAYMENT. Make check payable to "HAWAII STATE TAX COLLECTOR" in U.S. dollars drawn on any bank. Write your T.A. Registration number on the check.					17
18. GRAND TOTAL EXEMPTIONS/DEDUCTIONS FROM BACK OF FORM					18.

I declare, under the penalties set forth in section 237D-17, HRS, that this is a true and correct return, prepared in accordance with the provisions of the Transient Accommodations Tax Law, Chapter 237D, HRS.

IN THE CASE OF A CORPORATION OR PARTNERSHIP, THIS RETURN MUST BE SIGNED BY AN OFFICER, PARTNER, OR DULY AUTHORIZED AGENT.

SIGNATURE

TITLE

DATE

MAILING ADDRESSES

OAHU DISTRICT OFFICE
P.O. BOX 2430
HONOLULU, HI 96804-2430

MAUI DISTRICT OFFICE
P.O. BOX 1427
WAILUKU, HI 96793-6427

HAWAII DISTRICT OFFICE
P.O. BOX 937
HILO, HI 96721-0937

KAUAI DISTRICT OFFICE
P.O. BOX 1687
LIHUE, HI 96766-5687

LIST DETAILS CONCERNING "EXEMPTIONS" AND/OR "DEDUCTIONS" CLAIMED.

Operators of health care facilities, school dormitories, lodging provided by nonprofit corporations or associations, military living accommodations, low-income rental accommodations subsidized by the government, accommodations furnished to full time post-secondary students, and accommodations furnished without charge are exempt from the tax. Also, any general excise taxes visibly passed on to the customer and any transient accommodation taxes visibly passed on to the customer after June 30, 1990 are not to be included as part of gross rental proceeds. Accounts that are worthless and actually charged off may be excluded from gross rental proceeds. If any of these exemptions or exclusions are claimed in column b on the front page, you must itemize them in the spaces provided below.

AMOUNT		DISTRICT 1 — OAHU
		TOTAL EXEMPTIONS and/or DEDUCTIONS (Enter here and on line 1, column b, front page.)

AMOUNT		DISTRICT 2 — MAUI, MOLOKAI, LANAI
		TOTAL EXEMPTIONS and/or DEDUCTIONS (Enter here and on line 2, column b, front page.)

AMOUNT		DISTRICT 3 — HAWAII
		TOTAL EXEMPTIONS and/or DEDUCTIONS (Enter here and on line 3, column b, front page.)

AMOUNT		DISTRICT 4 — KAUAI
		TOTAL EXEMPTIONS and/or DEDUCTIONS (Enter here and on line 4, column b, front page.)

AMOUNT		GRAND TOTAL EXEMPTIONS and/or DEDUCTIONS (Enter here and on line 18, front page.)

(NOTE: If additional space is needed, please attach schedule.)